

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

## File with:

Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
pm 5:19  
2010 MAY 21 PM 1:39

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

SHOMSHOR FOR IOWA HOUSEIMPORTANT: Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

PAUL SHOMSHOR

Political Party (if applicable)

DEMOCRAT

Office Sought

IOWA HOUSE

District (if Senate or House)

100

FORM

**DR-2**

(Rev. 12/2009)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1490

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Paul Shomshor

SIGNATURE OF PERSON FILING REPORT

712-325-0638

TELEPHONE

05/19/2010

DATE SIGNED

I AM FILING A

05/14/2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☒☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

16,487.51**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

5,800.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

22,287.51**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

10,555.00

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

11,732.51

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

- 0 -

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

6,630.49

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

- 0 -

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

- 0 -**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

SHOMSHOR FOR IOWA HOUSE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                                | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|--|--|-----------------|-----------------------------|
| 01/09/10                 | ID#<br>CK# 7112                                    | SCOTT McLAUGHLIN<br>2027 LINDEN ROAD<br>DEFIANCE IA 51527      |  | \$ 50.00        | <input type="checkbox"/>    |
| 01/09/10                 | ID#<br>CK# 1661                                    | JASON CHRISTENSEN<br>1775 210TH ST<br>AUBURN IA 50025          |  | 50.00           | <input type="checkbox"/>    |
| 01/09/10                 | ID# 9748<br>CK# 1119                               | MIDWEST PAC<br>1636 NW 114TH ST<br>CLIVE IA 50325              |  | 100.00          | <input type="checkbox"/>    |
| 01/09/10                 | ID# 6027<br>CK# 2832                               | DEERE PAC<br>666 GRAND AVE - #1707<br>DES MOINES IA 50309      |  | 1,000.00        | <input type="checkbox"/>    |
| 01/09/10                 | ID# 8251<br>CK# 2233                               | PRWPAC<br>711 HIGH ST<br>DES MOINES IA 50392                   |  | 750.00          | <input type="checkbox"/>    |
| 01/09/10                 | ID# 9659<br>CK# 1615                               | FEDERATION OF IA ZAGLERS<br>BOX 1756<br>DES MOINES IA 50306    |  | 250.00          | <input type="checkbox"/>    |
| 01/09/10                 | ID#<br>CK# 2549                                    | AMRISTAR PAC<br>BOX 363<br>COUNCIL BLUFFS IA 51502             |  | 250.00          | <input type="checkbox"/>    |
| 01/09/10                 | ID# 6082<br>CK# 1524                               | MIDAMERICAN ENERGY PAC<br>666 GRAND AVE<br>DES MOINES IA 50303 |  | 600.00          | <input type="checkbox"/>    |
| 01/09/10                 | ID# 6125<br>CK# 1047                               | IA REALTORS PAC<br>1370 NW 114TH #100<br>CLIVE IA 50325        |  | 2,000.00        | <input type="checkbox"/>    |
| 01/09/10                 | ID#<br>CK#   |  |  |                 | <input type="checkbox"/>    |

SUB-TOTAL

\$ 5,050.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

(Including candidate's personal funds)

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*

5 HOMSHOR FOR ZOWA HOUSE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED<br>(MM/DD/YR)           | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                                    | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | ✓ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|---------------------------------------|---|--|--|--------------------|---------------------------------------|
| 01/09/10                              | ID#<br>CK# 1036   | WESTERN IOWA ENERGY LLC<br>PO BOX 399<br>WALL LAKE IA 51466        |  | \$ 500.00          | <input type="checkbox"/>              |
| 01/09/10                              | ID# 6001<br>CK#   | NATIONWIDE MUTUAL INS CO PAC<br>314 52ND ST<br>DES MOINES IA 50312 |  | 250.00             | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
|                                       | ID#<br>CK#  |  |  |                    | <input type="checkbox"/>              |
| SUB-TOTAL                             |   |  |  | \$ 750.00          |                                       |
| TOTAL (if last page of this schedule) |   |  |  | \$ 5,800.00        |                                       |

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

|   |                          |
|---|--------------------------|
| SCHEDULE<br><b>B</b><br>(Rev. 07/03)                        | MONETARY<br>EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                          |

COMMITTEE NAME (Must be same as on Statement of Organization)

SHOASHOR FOR IOWA HOUSE

| DATE<br>EXPENDED<br>(MM/DD/YR)        | CANDIDATE<br>ID NUMBER<br>(if applicable)<br>AND PAC<br>CHECK<br>NUMBER | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE                     | PURPOSE<br>(DESCRIBE TRANSACTION) | AMOUNT<br>EXPENDED |
|---------------------------------------|---|--|-----------------------------------|--------------------|
| 01/14/10                              | ID#<br>CK# 1072   | CORRER PRINTING<br>1739 EAST GRAND<br>DES MOINES IA 50316                              | PRINTING FOR<br>NEWSLETTER        | \$125.00           |
| 01/28/10                              | ID#<br>CK# 1073   | USPS - POST OFFICE<br>COUNCIL BLUFFS IA<br>50502-                                      | STAMPS                            | 580.00             |
| 02/17/10                              | ID#<br>CK# 1074   | IOWA DEMOCRATIC PARTY<br>5661 FLEUR DRIVE<br>DES MOINES IA 50321                       | CONTRIBUTION                      | 5,000.00           |
| 03/20/10                              | ID#<br>CK# 1075   | <del>DELETED</del><br>IOWA DEMOCRATIC PARTY<br>5661 FLEUR DRIVE<br>DES MOINES IA 50321 | CONTRIBUTION                      | 100.00             |
| 04/06/10                              | ID#<br>CK# 1076   | IOWA DEMOCRATIC<br>PARTY<br>5661 FLEUR DRIVE<br>DES MOINES IA 50321                    | CONTRIBUTION                      | 1,000.00           |
| 04/27/10                              | ID#<br>CK# 1095   | IOWA DEMOCRATIC PARTY<br>5661 FLEUR DR<br>DES MOINES IA 51501                          | CONTRIBUTION                      | 3,750.00           |
|                                       | ID#<br>CK#  |  |                                   |                    |
|                                       | ID#<br>CK#  |  |                                   |                    |
| SUB-TOTAL                             |   |  |                                   | \$10,555.00        |
| TOTAL (if last page of this schedule) |   |  |                                   | \$10,555.01        |

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

STOMSHOR FOR IOWA HOUSE

Reset Form

SCHEDULE  
E  
(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS

☐ CHECK THIS BOX IF  
AMENDING FORM

| DATE<br>RECEIVED<br>(MM/DD/YR) | NAME AND ADDRESS<br>OF CONTRIBUTOR                            | RELATIONSHIP<br>TO CANDIDATE<br>* (if applicable) | DESCRIPTION<br>OF IN KIND<br>CONTRIBUTION | ESTIMATED<br>FAIR MARKET<br>VALUE | ✓ IF FOR<br>FUND-RAISER<br>CONTRIBUTION |
|--------------------------------|---|---|---|-----------------------------------|---|
| 02/10/10                       | IOWA DEMOCRATIC PARTY<br>5661 FLEUR DR<br>DES MOINES IA 50321 |   | POSTAGE &<br>PRINTING<br>FOR MAIL         | \$<br>1,716.52                    | <input type="checkbox"/>                |
| 02/20/10                       | SAME  |   | SAME                                      | 1,637.99                          | <input type="checkbox"/>                |
| 03/15/10                       | SAME  |   | SAME                                      | 1,637.99                          | <input type="checkbox"/>                |
| 05/06/10                       | SAME  |   | SAME                                      | 1,637.99                          | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |
|                                |   |   |   |                                   | <input type="checkbox"/>                |

SUB-TOTAL \$ 6,630.49

TOTAL (if last  
page of this  
schedule) \$ 6,630.49

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Page 1 of 1  
(for Schedule E)